

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	1/12/01
FORMALITY REVIEW	TH	453	01-29-01
RESPONSE FORMALITY REVIEW	not - (M)	571 825	05/03/01 6/12/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)...	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final	
Original	
1	11-20-03
2	4/19/04
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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